## PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

Application or Docket Number

| CLAIMS AS FILED - PART I (Column 1) (Column 2)                                      |  |   |               |                                    |                     |                          |          | SMALL ENTITY TYPE  |                        | OR   | OTHER THAN SMALL ENTITY |                        |
|---|--|---|---------------|------------------------------------|---------------------|--------------------------|----------|--------------------|------------------------|------|-------------------------|------------------------|
| TOTAL CLAIMS  |  |   |               |                                    |                     |                          |          | RATE               | FEE                    | ]    | RATE                    | FEE                    |
| FOR   |  |   | NUMBER FILED  |                                    | NUMBER EXTRA        |                          |          | BASIC FEE          | 150 00                 | OR   | BASIC FEE               | 300 00                 |
| TO  | OTAL CHARGE                                    | ABLE CLAIMS   | 26mi          | nus 20=                            | · 10                |                          |          | X\$ 25=            |                        | OR   | X\$50=                  |                        |
| _   | DEPENDENT C                                    |   |               | เกบร 3 =                           | • 0                 |                          |          | X100=              |                        | OR   | X200=                   |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |               |                                    |                     |                          |          | +180=              |                        | OR   | +360=                   |                        |
| * If the difference in column 1 is less than zero, enter *0" in column 2            |  |   |               |                                    |                     |                          |          | TOTAL              |                        | OR   | TOTAL                   |                        |
| 1 31 06 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)                |  |   |               |                                    |                     |                          |          | SMALL              | ENTITY                 | OR   | OTHER<br>SMALL          |                        |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER                                      |               | HIGH<br>NUME<br>PREVIO             | EST<br>BER<br>JUSLY | PRESENT<br>EXTRA         |          | RATE               | ADDI-<br>TIONAL<br>FEE |      | RATE                    | ADDI-<br>TIONAL<br>FEE |
|   | Total  | · 30  | Minus         | -26                                |                     | - 4                      | lf       | X\$ 25=            |                        | OR   | X\$50=                  | 201                    |
|   | Independent                                    | . 3   | Minus         | - 3                                | ·                   | = 0                      | Ī        | X100=              |                        | OR   | X200≈                   |                        |
| 1   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |               |                                    |                     |                          |          | +180=              |                        | OR   | +360=                   |                        |
| >   |  | (Column 1) CLAIMS REMAINING                                       |               | (Colum<br>HIGHE<br>NUME<br>PREVIO  | ST<br>ER            | (Column 3) PRESENT EXTRA | ۔<br>ا ا | RATE               | ADDI-<br>TIONAL        |      | RATE                    | ADDI-<br>TIONAL        |
| AMENDMENT   |  | AFTER<br>AMENDMENT  |               | PAID F                             |                     |                          | -        | VE 05              | FEE                    |      | X\$50=                  | FEE                    |
|   | Total  | ·   | Minus         | ••                                 |                     | =                        |          | X\$ 25=            |                        | OR   |                         |                        |
|   | Independent                                    | NTATION OF MU   | Minus         | ENDENT                             | CLAIM               |                          |          | X100=              |                        | OR   | X200=                   |                        |
| ل   | FIRST PRESE                                    | NIATION OF MIC  | CIN CE DE     |                                    |                     |                          |          | +180=              |                        | OR   | +360=                   |                        |
|   |  |   |               |                                    |                     |                          | A        | TOTAL<br>DDIT. FEE |                        | OR , | TOTAL<br>ADDIT. FEE     |                        |
|   |  | (Column 1)  |               | (Colum                             | n 2)                | (Column 3)               |          |                    |                        |      |                         |                        |
|   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                         |               | HIGHE<br>NUMB<br>PREVIOU<br>PAID F | ER<br>JSLY          | PRESENT<br>EXTRA         |          |                    | ADDI-<br>TIONAL<br>FEE |      | RATE                    | ADDI-<br>TIONAL<br>FEE |
|   | Total  |   | Minus         | •• .                               |                     |                          |          | X\$ 25=            |                        | OR   | X\$50=                  |                        |
|   | Independent                                    |   | Minus         | ***                                |                     | -                        | r        | X100=              |                        | OR   | X200=                   |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |               |                                    |                     |                          |          | +180=              |                        | OR   | +360=                   |                        |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |  |   |               |                                    |                     |                          |          |                    |                        |      | ·                       |                        |
| - II  | the "Highest Nur                               | mber Previously Pai<br>mber Previously Pai<br>ber Previously Paid | d For IN THIS | SPACE                              | COO MIGH            | 20, enc. 20,             |          | DIT. FEE           | opriate box            |      |                         |                        |